2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000096553

Entity Name: BEYOND LIMITS OF NORTHEAST FLORIDA, LLC

Current Principal Place of Business:

5233 SAN JOSE BOULEVARD
JACKSONVILLE, FL 32207

Current Mailing Address:

5233 SAN JOSE BOULEVARD
JACKSONVILLE, FL 32207 US

FEI Number: 27-1172851

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHEFAN, JEFFREY F
5233 SAN JOSE BOULEVARD
JACKSONVILLE, FL 32207 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JEFFREY CHEFAN   05/20/2024

Electronic Signature of Registered Agent   Date

Authorized Person(s) Detail :

Title	MANAGER	Title	CHAIRMAN
Name	CHEFAN, JEFFREY F	Name	MOORMAN, BRIAN
Address	5233 SAN JOSE BOULEVARD	Address	5233 SAN JOSE BOULEVARD
City-State-Zip:	JACKSONVILLE FL 32207	City-State-Zip:	JACKSONVILLE FL 32207
Title	MANAGER	Title	MANAGER
Name	MORRMAN, BRIAN	Name	CUTAJAR, JOSEPH
Address	820 HWY A1A N SUITE E-15	Address	5548 FIRST COAST HWY SUITE #101
City-State-Zip:	PONTE VEDRA BEACH FL 32082	City-State-Zip:	AMELIA ISLAND FL 32034
Title	AMBR	Title	AMBR
Name	IZZO, LOUIS	Name	COLLINS, DAN
Address	270 BROADWAY SUITE #103	Address	270 BROADWAY SUITE #103
City-State-Zip:	SARATOGA SPRINGS NY 12866	City-State-Zip:	SARATOGA SPRINGS NY 12866

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JEFFREY CHEFAN   MANAGER   05/20/2024

Electronic Signature of Signing Authorized Person(s) Detail   Date